

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Academy of Audiology, Inc. PAC

Full Name (Last, First, Middle Initial)

**A.** Friends of Sherrod Brown

Mailing Address 607 14th Street, NW, Suite 800

City Washington State DC Zip Code 20005-

Purpose of Disbursement

Candidate Name  
SHERROD BROWN

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 00

Transaction ID: 60921.E176

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Friends of Sherrod Brown

Mailing Address 607 14th Street, NW, Suite 800

City Washington State DC Zip Code 20005-

Purpose of Disbursement

Candidate Name  
SHERROD BROWN

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 00

Transaction ID: 60831.E165

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Friends of Lois Capps

Mailing Address 38 Ivy Street, SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement

Candidate Name  
LOIS G CAPPS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 23

Transaction ID: 60831.E160

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....